

09/869653

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	02/09
2	02/17
3	02/03
4	✓✓✓
5	✓✓✓
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10	✓✓✓
11	000
12	000
13	000
14	000
15	000
16	000
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18	✓✓✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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